### **Diabetes – Hypoglycemics – Sulfonylureas (14)**

Point-of-Sale (POS) edits are safety limitations that are automatically verified through computer programming at the time that a prescription claim is submitted at the pharmacy. These edits can be applied to *any* medication, whether or not it is listed in the Preferred Drug List / Non-Preferred Drug List (PDL/NPDL). The first section of this document is organized to follow the order of the therapeutic classes in the PDL/NPDL and explains the POS edits for those medications.

#### **POS Abbreviations**

| AL – Age Limit  | <b>DD</b> – Drug-Drug Interaction         | MD – Maximum Dose Limit   | <b>TD</b> – Therapeutic Duplication     |
|---|---|---|---|
| <b>BH</b> – Behavioral Health Clinical<br>Authorization for Children<br>Younger than 6-7 Years of Age | <b>DS</b> Maximum Days' Supply Allowed    | <b>PR</b> – Enrollment in a Physician-<br>Supervised Program Required | UN – Drug Use Not Warranted             |
| <b>BY</b> – Diagnosis Codes Bypass<br>Some Requirements   | <b>DT</b> – Duration of Therapy Limit     | PU – Prior Use of Other<br>Medication is Required                     | X – Prescriber Must Have 'X' DEA Number |
| CL – Additional Clinical<br>Information is Required   | <b>DX</b> – Diagnosis Code<br>Requirement | <b>QL</b> – Quantity Limit  | <b>YQ</b> – Yearly Quantity Limit       |
| CU – Concurrent Use with Other<br>Medication is Restricted  | ER – Early Refill                         | RX – Specific Prescription<br>Requirement                             |   |

#### Pharmacy Prior Authorization Phone Numbers for MCOs and FFS

Aetna Better Health of Louisiana 1-855-242-0802
AmeriHealth Caritas Louisiana 1-800-684-5502
Fee-for-Service (FFS) Louisiana Legacy Medicaid 1-866-730-4357
Healthy Blue 1-844-521-6942
Louisiana Healthcare Connections 1-888-929-3790
UnitedHealthcare 1-800-310-6826

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## **POS Edits**

**TD** – These agents are monitored at the pharmacy POS for duplication of therapy with other sulfonylureas.

| Revision                                  | Date          |  |
|---|---------------|--|
| Created POS Document                      | February 2020 |  |
| Added therapeutic duplication information | July 2020     |  |